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WR:jam 10/05/05 6395-67856-06 435514 I-023-03

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Marcia L. Kalish et al.

Application No.: To be assigned

Filed: To be assigned

Confirmation No.: To be assigned

For: MULTIPLE ANTIGENIC PEPTIDE

ASSAY FOR DETECTION OF HIV OR

SIV TYPE RETROVIRUSES

Examiner: To be assigned Art Unit: To be assigned

Attorney Reference No.: 6395-67856-06

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as Express Mail Label No. EV669611391US in an envelope addressed to: MAIL STOP PCT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

for Applicant(s

Date Mailed October 5, 2005

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PURSUANT TO 37 C.F.R. § 1.97(b)(2)

Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language documents. Applicants respectfully request that these documents be listed as references cited on the issued patent.

Applicants filed this Information Disclosure Statement ("IDS") within three months of the date of entry of the national stage as set forth in § 1.491 in an international application. As a result, no fee should be required to file this IDS. However, if the Patent Office determines that a fee is required for Applicants to file this IDS, please charge any such fees, or credit overpayment, to Deposit Account No. 02-4550. A duplicate copy of this IDS is enclosed.

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PATENT

The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

Wayne W. Rupert

Registration No. 34,420

One World Trade Center, Suite 1600 121 S.W. Salmon Street Portland, Oregon 97204

Telephone: (503) 226-7391 Facsimile: (503) 228-9446

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Attorney Docket Number	6395-67856-06	
Application Number	To be assigned	
Filing Date	To be assigned	
First Named Inventor	Marcia L. Kalish	
Art Unit	To be assigned	
Examiner Name	To be assigned	

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EXAMINER	DATE
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^{*} Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.

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	E	BY APPLICANT		First Named Inventor		Marcia L. Kalish
		Art Unit		To be assigned		
				Examiner Name		To be assigned
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			Application Number	To be assigned	
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	BY APPLICANT		First Named Inventor	Marcia L. Kalish	
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